

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

M-PAC

ADDRESS (number and street) ▼

700 13th Street, NW

Suite 600

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00365270

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Tracy Newman

Signature of Treasurer

Tracy Newman

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

M-PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2012

To:

M M	/	D D	/	Y Y Y Y Y
04		30		2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2012</td></tr></table>	Y	Y	Y	Y	Y	2012						<table><tr><td colspan="5">39730.77</td></tr></table>	39730.77				
Y	Y	Y	Y	Y													
2012																	
39730.77																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">21307.89</td></tr></table>	21307.89															
21307.89																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">17500</td></tr></table>	17500					<table><tr><td colspan="5">95500</td></tr></table>	95500									
17500																	
95500																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">38807.89</td></tr></table>	38807.89					<table><tr><td colspan="5">135230.77</td></tr></table>	135230.77									
38807.89																	
135230.77																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">9833</td></tr></table>	9833					<table><tr><td colspan="5">106255.88</td></tr></table>	106255.88									
9833																	
106255.88																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">28974.89</td></tr></table>	28974.89					<table><tr><td colspan="5">28974.89</td></tr></table>	28974.89									
28974.89																	
28974.89																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0</td></tr></table>	0															
0																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">1271.24</td></tr></table>	1271.24															
1271.24																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**M-PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
04		01		2012

To:

M M	/	D D	/	Y Y Y Y Y Y
04		30		2012

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other  
Than Political Committees

(i) Itemized (use Schedule A).....

5000

15500

(ii) Unitemized .....

0

0

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

5000

15500

(b) Political Party Committees .....

0

0

(c) Other Political Committees

(such as PACs).....

12500

80000

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

17500

95500

## 12. Transfers From Affiliated/Other

Party Committees.....

0

0

## 13. All Loans Received .....

0

0

## 14. Loan Repayments Received.....

0

0

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0

0

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0

0

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0

0

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5) .....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶

17500

95500

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

17500

95500

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	9833	26255.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9833	26255.88
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	65000
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	0	15000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9833	106255.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9833	106255.88

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	17500	95500
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17500	95500
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	9833	26255.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	9833	26255.88

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 9  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**M-PAC**

Full Name (Last, First, Middle Initial) <b>A. Nicolas J. Hanauer</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>04 / 26 / 2012</div> </div>	
Mailing Address 179 Cascade Drive, NW		<b>Transaction ID : C861</b>	
City Seattle	State WA	Zip Code 98177	
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>5000</div>	
Name of Employer Second Avenue Partners	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div>5000</div>		
Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div></div> </div>	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div></div>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div></div>		
Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div></div> </div>	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div></div>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div></div>		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		<div>5000.00</div>	
<b>TOTAL</b> This Period (last page this line number only)..... ▶		<div>5000.00</div>	

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 9

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**M-PAC**

Full Name (Last, First, Middle Initial)

## **A. Norfolk Southern Corporation Good Government Fund**

Mailing Address 3 Commercial Place  
Suite 375

City State Zip Code  
Norfolk VA 23510

FEC ID number of contributing  
federal political committee.

**C** C00009282

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

**04** / **26** / **2012**

**Transaction ID : C860**

Amount of Each Receipt this Period

5000

Full Name (Last, First, Middle Initial)

## **B. American Society of Anesthesiologists Political Action Committee**

Mailing Address 520 North Northwest Highway

City State Zip Code  
Park Ridge IL 60068

FEC ID number of contributing  
federal political committee.

**C** C00255752

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

**04** / **19** / **2012**

**Transaction ID : C858**

Amount of Each Receipt this Period

5000

Full Name (Last, First, Middle Initial)

## **C. American Staffing Association PAC**

Mailing Address 277 S. Washington Street  
Suite 200

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00145623

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500

Date of Receipt

**04** / **30** / **2012**

**Transaction ID : C859**

Amount of Each Receipt this Period

2500

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

12500.00

12500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 9

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**M-PAC**

Full Name (Last, First, Middle Initial)

**A. Tracey Buckman & Associates**

Mailing Address 2311 Creek Drive

City Alexandria      State VA      Zip Code 22308

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      24      2012
**Transaction ID : D776**

Amount of Each Disbursement this Period

1800

Full Name (Last, First, Middle Initial)

**B. Newman Partners**Mailing Address 3417 Freemont Avenue North  
Suite 400

City Seattle      State WA      Zip Code 98103

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      04      2012
**Transaction ID : D780**

Amount of Each Disbursement this Period

4000

Full Name (Last, First, Middle Initial)

**C. Newman Partners**Mailing Address 3417 Freemont Avenue North  
Suite 400

City Seattle      State WA      Zip Code 98103

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      10      2012
**Transaction ID : D779**

Amount of Each Disbursement this Period

4000

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9800.00

9800.00



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 9 OF 9

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**M-PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Perkins Coie LLP**

Nature of Debt (Purpose):

Legal &amp; Accounting Services

Mailing Address 1201 Third Avenue  
Suite 4800City State Zip Code  
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

1271.24

Transaction ID : D608

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

1271.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

1271.24

2) **TOTALS** This Period (last page this line number only)..... ►

1271.24

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

1271.24